According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-F-0001

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

NATIONAL MARINE MAMMALS LABS/A F S C, N M F S
7600 SAND PT WAY, NOAA BLDG. 32

SEATTLE, WA 98115

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals	0	15748	744	0	16492

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		18-DEC-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036

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Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-F-0001

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*
NATIONAL MARINE MAMMALS LABS/A F S C, N M F S
7600 SAND PT WAY, NOAA BLDG. 32

SEATTLE, WA 98115

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets if necessary or use this form.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
BELUGA WHALE	0	12	0	0	12
KILLER WHALE	0	3	0	0	3
HUMPBACK WHALE	0	7	0	0	7
BLUE WHALE	0	1	0	0	1
BRYDES WHALE	0	78	0	0	78
NORTHERN FUR SEAL	0	15244	0	0	15244
STELLARE SEA LION	0	3	194	0	197
RIBBON	0	2	13	0	15
BEARDED SEAL	0	2	0	0	2
SPOTTED SEAL	0	3	5	0	8
HARBOR SEAL	0	12	15	0	27
CALIFORNIA SEA LION	0	381	517	0	898

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(*Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.)*)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

(b)(6), (b)(7)(c)

[redacted]

DATE SIGNED
18-DEC-2014

APHIS FORM 7023A
AUG 2013

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OMB APPROVED
0579-0036
Exp.: 10/31/2018

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Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-F-0002

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

DEPT. OF CLINICAL INVESTIGATIONS
9040 Fitzsimmons Drive
MCHJ-CI, Room G-15-C2
TACOMA, WA 98431

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	65	0	65
12. Other Farm Animals	0	0	25	0	25
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		

APHIS Form 7023 IACUC Approved Exceptions Addendum for FY: 2014

Registration Number: 91-R-0001
Customer ID Number: 1016

Facility Business Address Information:
University of Washington
Box 357160
Seattle, WA 98195

Telephone: (b) (6), (b) (7)

IACUC Approved Exceptions:

Exception: The exception is to house infant monkeys (age 2 weeks to a body weight of 1kg) in cages that meet floor space requirements but are only 24" high.
Species: Macaca fascicularis, Macaca mulatta, Macaca nemestrina
Number of animals used: 25

USDA and IACUC Approved Exceptions:

Exception: USDA and UW IACUC approved exception is approved for animals #A09044 to have up to 5 major surgeries after having major surgery on a different project.
Species: Macaca mulatta
Number of animals used: 1

001
University of Washington
Seattle, WA 98195
Assigned Inspector: (b) (6), (b) (7)(C)

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OMB APPROVED
0579-0036
Exp.: 10/31/2018

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Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0001

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

UNIVERSITY OF WASHINGTON
BOX 357160

SEATTLE, WA 98195

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	16	2	0	18
5. Cats	0	0	12	0	12
6. Guinea Pigs	7	0	41	0	41
7. Hamsters	0	30	2	0	32
8. Rabbits	27	61	218	0	279
9. Non-human Primates	416	480	315	0	795
10. Sheep	0	0	0	0	0
11. Pigs	2	0	252	0	252
12. Other Farm Animals	0	20	0	0	20
13. Other Animals	142	535	0	0	535

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		23-FEB-2015

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OMB APPROVED
0579-0036

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Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0001

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*
UNIVERSITY OF WASHINGTON
BOX 357160

SEATTLE, WA 98195

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets if necessary or use this form.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
FERRETS	0	109	0	0	109
GIRBILS	0	2	0	0	2
BATS	134	332	0	0	332
WILD MICE	0	3	0	0	3
WILD COUGARS	0	13	0	0	13
WILD BOBCATS	0	9	0	0	9
WILD BEAVER	8	14	0	0	14
WILD DEER	0	53	0	0	53

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(*Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.)*)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

(b)(6), (b)(7)(c) [redacted]

DATE SIGNED
23-FEB-2015

APHIS FORM 7023A
AUG 2013

USDA ANNUAL REPORT – 2013/2014

Column E Explanation Form

1) Registration #: 91-R-0002
2) Number of Animals Used in this Study (type E): 8
3) Species (Common name): Bighorn Sheep

4) Explain the Procedures producing pain and/or distress:

This project utilized 8 bighorn sheep (BHS) to study the natural transmission of pneumonia. Naïve BHS were commingled with BHS that have survived a pneumonia outbreak. Hence the commingled naïve BHS have the potential to develop pneumonia. The pain/distress is due to development of pneumonia. Clinical signs of pneumonia in BHS include anorexia, depression, or reduced activity level, abnormal body temperature, coughing, dyspnea, ocular and/or nasal discharge.

5) Provide scientific justification why pain and/or distress could not be relieved. State methods or means used to determine that pain and/or distress relief would interfere with test results. (For Federally mandated testing, see item 6 below).

In this study, the development of pneumonia (or lack thereof) is essential to this research and therefore precludes the use of antibiotics. This study involves bighorn sheep and the non-domesticated nature of these animals presents a complication in early detection of pneumonia. Since BHS are wild animals, it can be difficult to capture them in order for a veterinarian to perform a physical exam. While handling facilities are in place to ease this process, capture episodes still have a real possibility of inducing stress, traumatic injuries, and/or capture myopathy. The addition of stress for regular capture sessions in order to monitor the BHS would introduce a confounding factor and likely change study results. Because of this, regular physical exams and drug administration for individual animals is not possible. Thus the animals are monitored from a distance to detect clinical signs of severe pneumonia. Once clinical signs are noted, the animals are captured, examined by a veterinarian to confirm pneumonia, and then humanely euthanized in order to alleviate pain and distress. It is this time period (the onset of disease to the development the signs of severe pneumonia) that is the basis for the "E" classification. In humans, pneumonia is typically not a painful disease, especially during the early stages. However, because of the inability to monitor and treat individual animals early in the disease process as described above, and the potential for advanced pneumonia in the absences of observed disease, the IACUC elected to err on the side of caution and classify these as "E" protocols.

6) What, if any, federal regulations require this procedure? Cite the agency, the code of federal regulations (CFR) title number and the specific section number (e.g. APHIS, 9 CFR 113.102):
Agency:_____NA_____CFR_____

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OMB APPROVED
0579-0036
Exp.: 10/31/2018

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Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0002

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

WASHINGTON STATE UNIVERSITY
OFFICE OF THE CAMPUS VETERINARIAN
P O BOX 641165
PULLMAN, WA 99164

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

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4. Dogs	62	140	210	0	350
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	2	0	0	2
8. Rabbits	0	19	93	0	112
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	5	8	0	13
11. Pigs	0	0	0	0	0
12. Other Farm Animals	0	84	65	0	149
13. Other Animals	94	1021	94	8	1123

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		23-FEB-2015

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0579-0036

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Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0002

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

WASHINGTON STATE UNIVERSITY
OFFICE OF THE CAMPUS VETERINARIAN
P O BOX 641165
PULLMAN, WA 99164

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets if necessary or use this form.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
ALPACAS	0	2	14	0	16
LLAMAS	0	2	5	0	7
BEARS	0	12	0	0	12
BIGHORN SHEEP	17	13	21	8	42
DEER	0	42	0	0	42
BATS	0	0	53	0	53
COTTONTAIL RABBITS	0	10	0	0	10
PYGMY RABBITS	0	19	0	0	19
FERRET	0	1	0	0	1
TASMANIAN DEVIL	0	728	0	0	728
VOLES	0	2	0	0	2
CHIPMUNKS	0	54	0	0	54
DEER MICE	49	94	0	0	94
DEGUS	28	26	0	0	26
GROUND SQUIRRELS	0	2	0	0	2
KEEN'S MICE	0	6	0	0	6
PACIFIC JUMPING MICE	0	8	0	0	8
CAMEL	0	0	1	0	1

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(*Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.)*)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

(b)(6), (b)(7)(c) [redacted]

DATE SIGNED
23-FEB-2015

APHIS FORM 7023A
AUG 2013

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0006

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

BATTELLE MEMORIAL INSTITUTE
P. O. Box 999
902 Batelle Blvd. MSIN K1-46
RICHLAND, WA 99352

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F) [redacted]

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	5	0	0	5
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	2	0	0	2
11. Pigs	0	2	22	0	24
12. Other Farm Animals	0	28	0	0	28
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c) [redacted]		

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0009

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

EASTERN WASHINGTON UNIVERSITY
214 SHOWALTER HALL

CHENEY, WA 99004

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		23-OCT-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0011

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

JUBILANT HOLLISTER-STIER (J H S)
N. 3525 REGAL STREET

SPOKANE, WA 99207

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	285	2756	0	0	2756
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		04-NOV-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0018

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

PIERCE COLLEGE
9401 FARWEST DRIVE S.W.

LAKEWOOD, WA 98498

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	17	0	17
5. Cats	0	0	16	0	16
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	5	0	0	5
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	2	0	0	2
11. Pigs	0	0	0	0	0
12. Other Farm Animals	0	6	0	0	6
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		03-DEC-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0023

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

CENTRAL WASHINGTON UNIVERSITY
Graduate Studies & Research
400 E. University Way, Barge Hall 214
ELLENSBURG, WA 98926

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	24	0	132	0	132
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

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4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		19-DEC-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0025

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

FRED HUTCHINSON CANCER RESEARCH CENTER
1100 Fairview Avenue North, MS CD-101
P.O. Box 19024
SEATTLE, WA 98109

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	4	53	120	0	173
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	4	0	4
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0030

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

V M R D INC.
P. O. BOX 502

PULLMAN, WA 99163

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	6	0	0	6
11. Pigs	0	13	0	0	13
12. Other Farm Animals	0	19	0	0	19
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		23-OCT-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0043

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

BIO-RESEARCH LABORATORIES INC.
P.O. Box 489

PRESTON, WA 98050

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		23-OCT-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0051

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

YAKIMA VALLEY COMMUNITY COLLEGE
P.O. BOX 22520

YAKIMA, WA 98907

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	54	47	0	101
5. Cats	0	70	37	0	107
6. Guinea Pigs	0	1	1	0	2
7. Hamsters	0	0	0	0	0
8. Rabbits	0	1	1	0	2
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		12-DEC-2014

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Summary of IACUC Approved Exceptions to the AWA:

1. Cage Sanitation for Nonhuman Primates During CDC Quarantine (SRC):

   The Animal Welfare Act requires sanitation of the primary enclosure of nonhuman primates "at least once every 2 weeks and as often as necessary to prevent an excessive accumulation of dirt, debris, waste, food waste, excreta, or disease hazard."

   This variance would allow an extension from the AWA requirements for the first cage sanitation following receipt from a 14 day to 19 day maximum interval. If the first cage sanitation during quarantine is delayed for four days during the CDC mandated quarantine period, this will synchronize sanitation procedures with Tb testing, thus reducing the number of times the animals must be sedated.

   During any period when the sanitation extension is in place, cages will be visually monitored by Husbandry personnel during standard daily room cleaning and any "grossly soiled" cages (e.g., excessive amounts of debris which may contain unacceptable concentrations of microorganisms or affect normal behavior) will be reported to Colony Manager/Supervisor or a Clinical Veterinarian. Then necessity of cage change will be discussed and determined by these personnel taking into consideration each animal's condition and status.

   This exemption is requested to reduce stress on the animals and to stabilize food consumption during the quarantine and stabilization period by reducing the number of times the animals must be sedated.

   The total number of animals affected by this variance during the reporting year was 480.

2. Exception: Minimum Space Requirements for Group 1 and 2 Housing (SRC)

   The Animal Welfare Act states "the minimum space that must be provided to *each* nonhuman primate, whether housed individually or with other nonhuman primates, will be determined by the typical weight of animals of its species." Nonhuman primates are divided into 6 groups by species and size. Group 1 is defined as "marmosets, tamarins, and infants (less than 6 months of age) of various species." The table detailing minimum space requirements by group determines that animals falling into Group 1 must meet the following criteria for housing: Weight – under 2.2lbs or under 1kg; Floor area – 1.6 ft sq or 0.15 m sq; Height – 20" or 50.8 cm. Group 2 is defined as "capuchins, squirrel monkeys and similar size species, and juveniles (6 months to 3 years of age) of various species. Minimum housing requirements for Group 2 are: Weight – 2.2 – 6.6 lbs or 1 – 3 kg; Floor area – 3.0 ft sq or 0.28 m sq; Height – 30" or 76.2 cm.

   An exception from the aforementioned regulations is requested to allow for the reduction of housing space for infants requiring incubation care. On occasion, it is necessary to place infants in incubators for clinical reasons, or for body temperature support following maternal rejection. In these cases, infants may be housed in incubators until they are able to thermoregulate and a suitable social partner is available.

   Incubators do not meet the minimum requirements for Group 1 or Group 2 housing. This request is to waive the sizing requirements for the duration of incubation as determined by a veterinarian. Infants will be removed from incubation and placed in housing meeting or exceeding the minimum standards as set forth in the regulations when a veterinarian determines this change will be beneficial to the health and welfare of the infant.

   The number of animals impacted by this variance during the reporting year was 10.

3. Exception: Minimum Space Requirements for NHP over 10kg (WA)

The Animal Welfare Act states "The minimum space that must be provided to *each* nonhuman primate, whether housed individually or with other nonhuman primates, will be determined by the typical weight of animals of its specie". Non human primates are divided into 6 groups by species and size. NHP over 10kg fall under Group 4, which requires Floor area – 6.0 ft sq or 0.4 m sq; Height – 32" or 81.28 cm.

An exception from the aforementioned regulations is requested to allow for the reduction of housing space for Cynomolgus Monkeys during CDC and DI Quarantine. Floor space will not be further reduced by food or water bowls. This is a temporary situation during which animals will be able to maintain normal posture and species specific behavior. After release from CDC and Domestic Isolation, the animals will be housed in appropriate sized caging.

The number of animals impacted by this variance during the reporting year was 18.

4. Exception: Cage Sanitation for Live Births (WA)

The Animal Welfare Act requires sanitation of the primary enclosure of nonhuman primates "at least once every 2 weeks and as often as necessary to prevent an excessive accumulation of dirt, debris, waste, food waste, excreta, or disease hazard."

This exemption is to request that cage change-outs for sanitation be delayed for two days following a live birth. In cases where a birth occurs on the second day following the extension of the fourteen day period, an additional two day extension would apply

This exemption is requested to reduce maternal and infant stress in the immediate postpartum period and thereby decrease the likelihood of infant rejection.

During any period when the sanitation extension is in place, cages will be visually monitored by Husbandry personnel during standard daily room cleaning and by research staff during study procedures and any "grossly soiled" cages (e.g., excessive amounts of debris which may contain unacceptable concentrations of microorganisms or affect normal behavior) will be reported to Colony Manager, Study Supervisor, Veterinarians or Study Director. Then necessity of cage change will be discussed and determined by these personnel taking into consideration each animal's condition and status (e.g., close to delivery, shortly after delivery, excessively nervous animal, etc.).

Because cage change activity can affect all animals in the room, this exemption of cage change will be applied to all cages in the effected rooms

The number of animals impacted by this variance during the reporting year was 28.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0053

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

SNBL USA LTD
6605 MERRILL CREEK PARKWAY

EVERETT, WA 98203

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	7	9	30	0	39
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	45	867	0	0	867
9. Non-human Primates	6102	1795	548	0	2343
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		24-FEB-2015

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0054

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

TRIPLE J FARMS & KENT LABS
777 JORGENSEN PLACE

BELLINGHAM, WA 98226

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals	5	27	0	0	27
13. Other Animals	40	6	0	0	6

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		17-OCT-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0054

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*
TRIPLE J FARMS & KENT LABS
777 JORGENSEN PLACE

BELLINGHAM, WA 98226

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets if necessary or use this form.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
LLAMAS	40	6	0	0	6

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

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3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(*Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.)*)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

(b)(6), (b)(7)(c)

[redacted]

DATE SIGNED
17-OCT-2014

APHIS FORM 7023A
AUG 2013

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0059

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

Seattle Childrens Research Institute
1900 - 9TH AVENUE

SEATTLE, WA 98101

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	14	0	14
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	1	0	94	0	94
12. Other Farm Animals					
13. Other Animals	18	0	336	1	337

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		24-FEB-2015

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0059

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*
Seattle Childrens Research Institute
1900 - 9TH AVENUE

SEATTLE, WA 98101

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets if necessary or use this form.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
SPINY MICE	18	0	336	1	337

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(*Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.)*)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

(b)(6), (b)(7)(c)

[redacted]

DATE SIGNED
24-FEB-2015

APHIS FORM 7023A
AUG 2013

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0061

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

INFECTIOUS DISEASE RESEARCH INSTITUTE (I D R I)
1616 Eastlake Ave. East, Suite 400

SEATTLE, WA 98102

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	165	0	165
7. Hamsters	0	0	122	0	122
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		03-NOV-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0065

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

OMEROS CORP.
201 Elliott Avenue West

SEATTLE, WA 98119

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		04-DEC-2015

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0066

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

R & R Research L L C
20004 Happy Valley Road

STANWOOD, WA 98292

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	720	261	12	0	273
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	41	0	41
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		27-OCT-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0068

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

Seattle Science Foundation
550 17th Avenue, Suite 600

SEATTLE, WA 98122

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		12-NOV-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0069

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

DEPLOYMENT MEDICINE INTERNATIONAL
P. O. Box 1264

GIG HARBOR, WA 98335

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F) [redacted]

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	432	0	432
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c) [redacted]		

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0070

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

SEATTLE PACIFIC UNIVERSITY
College of Arts & Sciences Ste 119

SEATTLE, WA 98119

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals	119	88	12	0	100

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		03-NOV-2014

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0070

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*
SEATTLE PACIFIC UNIVERSITY
College of Arts & Sciences Ste 119

SEATTLE, WA 98119

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets if necessary or use this form.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
CALIFORNIA MICE	119	88	12	0	100

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(*Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.)*)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

(b)(6), (b)(7)(c)

[redacted]

DATE SIGNED
03-NOV-2014

APHIS FORM 7023A
AUG 2013

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0071

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

Zymogenetics, Inc
1201 Eastlake Avenue East

SEATTLE, WA 98102

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	81	0	81
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		

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OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-R-0072

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

Pi Bioscientific Inc.
8315 Lake City Way N E

SEATTLE, WA 98118

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	2	3	0	0	3
11. Pigs	0	0	0	0	0
12. Other Farm Animals	17	28	0	0	28
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		14-JAN-2015

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036
Exp.: 10/31/2018

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year 2014

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER
91-V-0001

2. HEADQUARTERS RESEARCH FACILITY *(Name, address, and telephone number as registered with USDA, include ZIP Code)*

V A MEDICAL CENTER #663
MAIL STOP 151/1660 SOUTH COLUMBIAN WAY

SEATTLE, WA 98108

3. REPORTING FACILITY *(List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)*

FACILITY LOCATIONS *(Sites)*

(b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets, if necessary, or use APHIS FORM 7023A.)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)*	F. TOTAL NUMBER OF ANIMALS **(Cols. C + D + E)**
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	3	0	8	0	8
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR I.O.	NAME AND TITLE OF C.E.O. OR I.O. *(Type or Print)*	DATE SIGNED
(b)(6), (b)(7)(c)		14-JAN-2015